

UNITED STATES DISTRICT COURT CENTRAL DISTRICT OF CALIFORNIA

PRESTON SMITH

CASE NUMBER

CV10-8840 VBF (AGRx)

PLAINTIFF(S)

٧.

CITY OF BURBANK, ET AL.

DEFENDANT(S).

NOTICE TO PARTIES OF ADR PROGRAM

Dear Counsel,

The district judge to whom the above-referenced case has been assigned is participating in an ADR Program. All counsel of record are directed to jointly complete the attached ADR Program Questionnaire, and plaintiff's counsel (or defendant in a removal case) is directed to concurrently file the Questionnaire with the report required under Federal Rules of Civil Procedure 26(f).

Clerk, U.S. District Court

11/17/10

Date

By: TDURANT

Deputy Clerk

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MOTICE TO PARTIES OF AND PROGRAM

UNITED STATES DISTRICT COURT CENTRAL DISTRICT OF CALIFORNIA	
PRESTON SMITH	CASE NUMBER
PLAINTIFF(S)	CV10- 8840 VBF (AGRx)
V.	ADR PROGRAM QUESTIONNAIRE
CITY OF BURBANK, ET AL. DEFENDANT(S).	
(1) What, if any, discovery do the parties believe is essentia	al in order to prepare adequately for a settlement
conference or mediation? Please outline with specificity the	
late(s). Please outline any areas of disagreement int this re	
hat you will be able to take in the event this case does not s	settle.
(2) What are the damage amounts being claimed by each	plaintiff? Identify the categories of damage
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claimed [e.g., lost profits, medical expenses (past and futur	e), lost wages (past and future), emotional distress
	e), lost wages (past and future), emotional distress
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(3) Do the parties agree to utilize a private me	diator in lieu of the court's ADR Program?
Yes [] No []	
(4) if this case is in category civil rights - emplo	byment (442), check all boxes that describe the legal bases of
∐ Title VII	☐ Age Discrimination
☐ 42 U.S.C. section 1983	California Fair Employment and Housing Act
Americans with Disabilities Act of 1990	[] Rehabilitation Act
[] Other	
I hereby certify that all parties have discussed correct.	and agree that the above-mentioned responses are true and
Date	Attorney for Plaintiff (Signature)
	Attorney for Plaintiff (Please print full name)
Date	Attorney for Defendant (Signature)
	Attorney for Defendant (Please print full name)

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